

KISHWAUKEE WOMEN'S NETWORK

MEMBERSHIP APPLICATION

The Kishwaukee Women's Network promotes the goals and objectives of the Sycamore Chamber of Commerce and assists businesswomen throughout the community in improving their networking capabilities and helping grow their business by introducing various ideas, concepts and techniques that may serve to be a great value in reaching their goals. To act as a network for a more effective exchange of ideas among women in the community and the businesses or service organizations they represent. To develop and encourage an informed viewpoint on policies and actions involving business and industry in Sycamore, DeKalb and neighboring areas.

Name _____ Your Title _____

Business Name _____ Web site _____

Business Address _____
Street City State Zip Code

Telephone _____ Fax _____ E-mail _____

Short description of your business _____

Categories of Membership (place an "x" on the option that pertains to you)

_____ Business/organization that I represent is a member with the Sycamore Chamber of Commerce. There is no additional fee to be a member of the KWN. Please complete this membership form. Cost for lunch will be \$15.00.

_____ Business/organization that I represent is located in Sycamore, is less than 12 months old and does not belong to a Chamber of Commerce. This form and fee of \$50.00 are due in order to become a member of the KWN. I understand that this membership is limited to one year, after which time a Sycamore Chamber of Commerce membership must be established and the fee will be applied toward the cost of this membership. Cost for lunch will be \$15.00

_____ Business/organization that I represent is not located in Sycamore but is a member of the following Chamber of Commerce _____. **This form and an annual fee of \$50 are due in order to become a member of the KWN. Cost for lunch will be \$15.00.**

Reservations: KWN meetings are held on the 3rd Thursday of each month from 11:30 a.m. - 1p.m. Lunch reservations are made by calling the Chamber at 895-3456 **by noon Monday prior to meeting.**
\$15.00 per lunch for all KWN Members \$20.00 per lunch for guests.

Must pay in advance or at door.

___ Cash ___ Check ___ Visa/Master Credit Card # _____ (_____) _____
Exp. Date

Signature

Date

**Fax (815-895-0125) or mail this form to the Sycamore Chamber of Commerce
Sycamore Chamber of Commerce, 407 West State Street, Suite 10, Sycamore, IL 60178**